

You're invited to



TREMFYA® Patient Journeys

Data from the APEX clinical trial



ROBERT

Small, well-defined, erythematous plaques with silvery scales on face, forearms, and scalp with low body surface area



Presented by

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APRN-C**

Nurse Practitioner
US Dermatology Partners

Date

Tuesday February 10, 2026

5:30 PM CT Arrival Web Presentation
6:00 PM CT Dinner & Presentation



Location

OCEAN ZEN
4117 South National Avenue
Springfield MO 65807
417-889-9596



Register at

mydomeprogramregistration.com

Enter Meeting Code: **2025-08258**



Data rates may apply.

Hypothetical patient.

The consultant is a paid speaker for Johnson & Johnson. The speaker is presenting on behalf of Johnson & Johnson and must present information in compliance with FDA requirements applicable to Johnson & Johnson.

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INDICATIONS

TREMFYA® (guselkumab) is indicated for the treatment of adults and pediatric patients 6 years of age and older who also weigh at least 40 kg with moderate to severe plaque psoriasis and who are candidates for systemic therapy or phototherapy.

TREMFYA® is indicated for the treatment of adults and pediatric patients 6 years of age and older who also weigh at least 40 kg with active psoriatic arthritis.

SELECTED IMPORTANT SAFETY INFORMATION

TREMFYA® is contraindicated in patients with a history of serious hypersensitivity reaction to guselkumab or to any of the excipients. Serious hypersensitivity reactions, including anaphylaxis, may occur. TREMFYA® may increase the risk of infection. Do not initiate treatment in patients with clinically important active infection until the infection resolves or is adequately treated. If such an infection develops, discontinue TREMFYA® until infection resolves. Evaluate for tuberculosis (TB) before treating with TREMFYA®. Monitor patients for signs and symptoms of active TB during and after treatment with TREMFYA®. Drug-induced liver injury has been reported. For the treatment of plaque psoriasis or psoriatic arthritis, if clinically indicated, evaluate liver enzymes and bilirubin at baseline, and periodically thereafter according to routine patient management. Interrupt treatment if drug-induced liver injury is suspected, until this diagnosis is excluded. Avoid use of live vaccines in patients treated with TREMFYA®. Please see related and other Important Safety Information on the next page.

IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS

TREMFYA® is contraindicated in patients with a history of serious hypersensitivity reaction to guselkumab or to any of the excipients.

WARNINGS AND PRECAUTIONS

Hypersensitivity Reactions

Serious hypersensitivity reactions, including anaphylaxis, have been reported with postmarket use of TREMFYA®. Some cases required hospitalization. If a serious hypersensitivity reaction occurs, discontinue TREMFYA® and initiate appropriate therapy.

Infections

TREMFYA® may increase the risk of infection. Treatment with TREMFYA® should not be initiated in patients with any clinically important active infection until the infection resolves or is adequately treated.

Consider the risks and benefits of treatment prior to prescribing TREMFYA® in patients with a chronic infection or a history of recurrent infection. Instruct patients receiving TREMFYA® to seek medical help if signs or symptoms of clinically important chronic or acute infection occur. If a patient develops a clinically important or serious infection, or is not responding to standard therapy, closely monitor and discontinue TREMFYA® until the infection resolves.

Tuberculosis (TB)

Evaluate patients for TB infection prior to initiating TREMFYA® treatment. Do not administer TREMFYA® to patients with active TB infection. Initiate treatment of latent TB prior to administering TREMFYA®. Consider anti-TB therapy prior to initiating TREMFYA® in patients with a past history of latent or active TB in whom an adequate course of treatment cannot be confirmed. Monitor all patients for signs and symptoms of active TB during and after TREMFYA® treatment.

Hepatotoxicity

A serious adverse reaction of drug-induced liver injury was reported in a clinical trial subject with Crohn's disease following three doses of a higher than recommended induction regimen.

DISCLOSURES

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In patients with plaque psoriasis or psoriatic arthritis, if clinically indicated, evaluate liver enzymes and bilirubin at baseline, and periodically thereafter according to routine patient management.

Consider other treatment options in patients with evidence of acute liver disease or cirrhosis. Prompt investigation of the cause of liver enzyme elevation is recommended to identify potential cases of drug-induced liver injury. Interrupt treatment if drug-induced liver injury is suspected, until this diagnosis is excluded. Instruct patients to seek immediate medical attention if they experience symptoms suggestive of hepatic dysfunction.

Immunizations

Prior to initiating TREMFYA®, complete all age-appropriate vaccinations according to current immunization guidelines. Avoid use of live vaccines in patients treated with TREMFYA®.

ADVERSE REACTIONS

Most common adverse reactions associated with TREMFYA® include: plaque psoriasis and psoriatic arthritis adverse reactions (≥1%): upper respiratory infections, headache, injection site reactions, arthralgia, bronchitis, diarrhea, gastroenteritis, tinea infections, and herpes simplex infections.

The safety profile observed in pediatric patients 6 years of age and older treated with TREMFYA® up to 52 weeks was consistent with the safety profile observed in adult patients with moderate to severe plaque psoriasis.

The overall safety profile observed in adult patients with psoriatic arthritis is generally consistent with the safety profile in adult patients with plaque psoriasis, with the addition of bronchitis and neutrophil count decreased.

Please read the full Prescribing Information and Medication Guide for TREMFYA®. Provide the Medication Guide to your patients and encourage discussion.

TREMFYA® is available as a 100 mg/mL subcutaneous injection.

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